BEVERLY TERRACE 121 HOSPITAL DR

WATERTOWN 53098 Phone: (920) 261-9220		Ownership:	Corporation
Operated from 1/1 To 12/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/04):	122	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/04):	122	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	115	Average Daily Census:	115

Services Provided to Non-Residents	Age, Gender, and Primary Di	agnosis	of Residents (1	2/31/04)	Length of Stay (12/31/04)	%		
Home Health Care	No	Primary Diagnosis	용	Age Groups	· 왕	Less Than 1 Year	50.4	
Supp. Home Care-Personal Care	No					1 - 4 Years	37.4	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	9.6	More Than 4 Years	12.2	
Day Services	No	Mental Illness (Org./Psy)	12.2	65 - 74	14.8			
Respite Care	No	Mental Illness (Other)	1.7	75 - 84	31.3		100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	36.5	*********	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.9	95 & Over	7.8	Full-Time Equivalent		
Congregate Meals No		Cancer	1.7			Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	8.7	İ	100.0	(12/31/04)		
Other Meals	No	Cardiovascular	13.0	65 & Over	90.4			
Transportation	No	Cerebrovascular	19.1			RNs	10.6	
Referral Service	No	Diabetes	0.9	Gender	%	LPNs	8.4	
Other Services	Yes	Respiratory	2.6			Nursing Assistants,		
Provide Day Programming for	j	Other Medical Conditions	39.1	Male	34.8	Aides, & Orderlies	39.6	
Mentally Ill	No			Female	65.2	İ		
Provide Day Programming for	j		100.0	İ		İ		
Developmentally Disabled	No			İ	100.0	j		
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Method of Reimbursement

		edicare itle 18			edicaid itle 19		Other		Private Pay		Family Care			Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	2	2.7	136	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	1.7
Skilled Care	26	100.0	296	62	82.7	117	0	0.0	0	12	92.3	185	0	0.0	0	1	100.0	440	101	87.8
Intermediate				11	14.7	98	0	0.0	0	1	7.7	185	0	0.0	0	0	0.0	0	12	10.4
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	-	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	26	100.0		75	100.0		0	0.0		13	100.0		0	0.0		1	100.0		115	100.0

BEVERLY TERRACE

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/04
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	7.0	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	1.1	Bathing	1.7		67.0	31.3	115
Other Nursing Homes	3.2	Dressing	18.3		77.4	4.3	115
Acute Care Hospitals	81.3	Transferring	27.0		61.7	11.3	115
Psych. HospMR/DD Facilities	1.1	Toilet Use	24.3		70.4	5.2	115
Rehabilitation Hospitals	1.6	Eating	56.5		38.3	5.2	115
Other Locations	4.8	*******	******	*****	*****	* * * * * * * * * * * * * * * * * * * *	*****
Total Number of Admissions	187	Continence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	10.4	Receiving Resp	iratory Care	7.8
Private Home/No Home Health	21.3	Occ/Freq. Incontiner	nt of Bladder	55.7	Receiving Trac	heostomy Care	0.9
Private Home/With Home Health	17.4	Occ/Freq. Incontiner	nt of Bowel	31.3	Receiving Suct	ioning	0.9
Other Nursing Homes	3.9	İ			Receiving Osto	my Care	0.0
Acute Care Hospitals	12.4	Mobility			Receiving Tube	Feeding	0.9
Psych. HospMR/DD Facilities	0.6	Physically Restraine	ed	1.7	Receiving Mech	anically Altered Diets	27.8
Rehabilitation Hospitals	0.0	<u> </u>				_	
Other Locations	10.1	Skin Care			Other Resident C	haracteristics	
Deaths	34.3	With Pressure Sores		1.7	Have Advance D	irectives	100.0
Total Number of Discharges		With Rashes		2.6	Medications		
(Including Deaths)	178	İ			Receiving Psyc	hoactive Drugs	67.8

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Pro	prietary	100	-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	8	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.3	84.2	1.12	86.9	1.08	87.7	1.07	88.8	1.06
	25.2	76.9	0.33	80.4	0.31	70.1	0.36	77.4	0.33
Current Residents from In-County									
Admissions from In-County, Still Residing	10.7	19.0	0.56	23.2	0.46	21.3	0.50	19.4	0.55
Admissions/Average Daily Census	162.6	161.6	1.01	122.8	1.32	116.7	1.39	146.5	1.11
Discharges/Average Daily Census	154.8	161.5	0.96	125.2	1.24	117.9	1.31	148.0	1.05
Discharges To Private Residence/Average Daily Census	60.0	70.9	0.85	54.7	1.10	49.0	1.23	66.9	0.90
Residents Receiving Skilled Care	89.6	95.5	0.94	96.9	0.92	93.5	0.96	89.9	1.00
Residents Aged 65 and Older	90.4	93.5	0.97	92.2	0.98	92.7	0.98	87.9	1.03
Title 19 (Medicaid) Funded Residents	65.2	65.3	1.00	67.9	0.96	68.9	0.95	66.1	0.99
Private Pay Funded Residents	11.3	18.2	0.62	18.8	0.60	19.5	0.58	20.6	0.55
Developmentally Disabled Residents	0.0	0.5	0.00	0.6	0.00	0.5	0.00	6.0	0.00
Mentally Ill Residents	13.9	28.5	0.49	37.7	0.37	36.0	0.39	33.6	0.41
General Medical Service Residents	39.1	28.9	1.35	25.4	1.54	25.3	1.54	21.1	1.86
Impaired ADL (Mean)	43.3	48.8	0.89	49.7	0.87	48.1	0.90	49.4	0.88
Psychological Problems	67.8	59.8	1.13	62.2	1.09	61.7	1.10	57.7	1.18
Nursing Care Required (Mean)	5.3	6.5	0.82	7.5	0.71	7.2	0.74	7.4	0.72